

## ADOPTION ASSISTANCE CASE ENTRY / PRE-ADOPTIVE CHILD CASES

**Use of form:** This form is to be used at the time of the placement of a child approved to receive Adoption Assistance by adoption workers unable to access WiSACWIS. Once completed, this information, along with a current copy of the Foster Home License, should be given to the Program Assistant for the region your agency is located in for entry into WiSACWIS.

### Pre-Adoptive Child

Name (Last, First, Middle)		Birthdate (mm/dd/yyyy)	City / State of Birth
Ethnicity	Religion		Social Security Number

### Birth Mother

Name (Last, First, Middle)		Name - Maiden	City / State of Birth
Birthdate (mm/dd/yyyy)	Ethnicity	Religion	Marital Status

### Birth Father

Name (Last, First, Middle)		City / State of Birth	Birthdate (mm/dd/yyyy)
Ethnicity	Religion		Marital Status

### Termination of Parental Rights (TPR)

TPR Date: Birth Mother - \_\_\_\_\_ Birth Father - \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

TPR County: \_\_\_\_\_ TPR Court Number: \_\_\_\_\_

TPR Judge: \_\_\_\_\_

### Foster Parent (1)

Name (Last, First, Middle)		Name - Maiden	Birthdate (mm/dd/yyyy)
Address (Street, City, State, Zip Code)			City and State of Birth
Race	Religion		Social Security Number

### Foster Parent (2)

Name (Last, First, Middle)		Birthdate (mm/dd/yyyy)
Address (Street, City, State, Zip Code)		City and State of Birth
Race	Religion	Social Security Number